SENATE BILL 163 (LRB -2083)

An Act to amend 40.51 (8), 40.51 (8m), 66.0137 (4), 111.91 (2) (n), 120.13 (2) (g), 185.981 (4t) and 185.983 (1) (intro.); and to create 609.87 and 632.895 (16) of the statutes; relating to: requiring health insurance coverage of colorectal cancer screening and granting rule-making authority. (FE)

2009			
04-08.	S.	Introduced by Senators Wirch, Taylor, Lehman, Hansen, Erpenbach, Risser, Darling, Kapanke, Plale, Coggs, Carpenter and Lassa; cosponsored by Representatives Colon, Barca, Benedict, Steinbrink, Hixson, Grigsby, Turner, Clark, Hubler, Milroy, A. Williams, Berceau, Jorgensen, Hebl, Hilgenberg, Young, Pope-Roberts, Mason, Townsend, Wood, Pasch and Bernard Schaber.	
04-08.	S.	Read first time and referred to committee on Health, Health Insurance, Privacy, Property Tax Relief, and	
		Revenue	123
05-06.	S.	Fiscal estimate received.	
05-22.	S.	Fiscal estimate received.	
08-18.	S.	Public hearing held.	
09-16.	S.	Senate amendment 1 offered by Senator Wirch (LRB a0718)	307
09-17.	S.	Executive action taken.	
09-22.	S.	Fiscal estimate received.	
09-23.	S.	Report adoption of Senate Amendment 1 recommended by committee on Health, Health Insurance, Privacy, Property Tax Relief, and Revenue, Ayes 7, Noes 0	323
09-23.	S.	Report passage as amended recommended by committee on Health, Health Insurance, Privacy, Property Tax Relief, and Revenue, Ayes 6, Noes 1	
09-23.	S.	Available for scheduling.	020
10-13.	S.	Placed on calendar 10-20-2009 by committee on Senate Organization	358
10-20.	S.	Senator Miller added as a coauthor	
10-20.	S.	Read a second time	
10-20.	S.	Senate amendment 1 adopted	
10-20.	S.	Ordered to a third reading	
10-20.	S.	Rules suspended	369
10-20.	S.	Read a third time and passed	
10-20.	S.	Ordered immediately messaged	
10-22.	A.	Received from Senate	
2010			
02-26.	A.	Read first time and referred to committee on Insurance	707
03-10.	A.	Assembly amendment 1 offered by Representative Molepske Jr. (LRB a1689)	
03-11.	A.		, , ,
03-17.	A.		758
03-17.	A.	Report concurrence as amended recommended by committee on Insurance, Ayes 6, Noes 4	
03-17.	A.	Referred to committee on Rules	
04-13.	A.	Made a special order of business at 11:58 A.M. on 4-15-2010 pursuant to Assembly Resolution 22	825
04-15.	A.	Representative Toles added as a cosponsor	
04-15.	A.	Read a second time	
04-15.	A.	Assembly amendment 1 adopted	
04-15.	A.		
04-15.	A.	Rules suspended	
04-15.	A.	Read a third time and concurred in as amended, Ayes 56, Noes 41	
04-15.	A.	Ordered immediately messaged	
04-16.	S.	Received from Assembly amended and concurred in as amended, Assembly amendment 1 adopted.	
04-16.	S.	Available for scheduling.	
04-16.	S.	Placed on calendar 4-20-2010 pursuant to Senate Rule 18(1).	
04-20.	S.	Assembly amendment 1 concurred in.	
04-20.	S.	Action ordered immediately messaged.	



2009 ENROLLED BILL

09en <u>S</u> **B**-<u>163</u>

ADOPTED DOCUMENTS:		
☑ Orig □ Engr	SubAmdt	09-20P3 / 1
Amendments to above (if n	one, write "NONE"): _	SA-1 (a0718/1) AA-1 (a1689/2)
Corrections - show date (if	none, write "NONE")	: None
Topic RELATING CLAUS	٤	
	4/22/10 (Date	Enrolling Drafter

April 8, 2009 – Introduced by Senators Wirch, Taylor, Lehman, Hansen, Erpenbach, Risser, Darling, Kapanke, Plale, Coggs, Carpenter and Lassa, cosponsored by Representatives Colon, Barca, Benedict, Steinbrink, Hixson, Grigsby, Turner, Clark, Hubler, Milroy, A. Williams, Berceau, Jorgensen, Hebl, Hilgenberg, Young, Pope-Roberts, Mason, Townsend, Wood, Pasch and Bernard Schaber. Referred to Committee on Health, Health Insurance, Privacy, Property Tax Relief, and Revenue.

AN ACT to amend 40.51 (8), 40.51 (8m), 66.0137 (4), 111.91 (2) (n), 120.13 (2) (g),

185.981 (4t) and 185.983 (1) (intro.); and to create 609.87 and 632.895 (16) of

the statutes; relating to: requiring health insurance coverage of colorectal

cancer screening and granting rule-making authority.

Analysis by the Legislative Reference Bureau

This bill requires health insurance policies and plans that cover any diagnostic or surgical procedures to cover colorectal cancer examinations and laboratory tests for any insured or enrollee who is 50 years of age or older or any insured or enrollee who is under 50 years of age and at high risk for colorectal cancer. The bill requires the commissioner of insurance, in consultation with the secretary of health services, to promulgate rules that specify guidelines for the colorectal cancer screening that must be covered, and that specify factors for determining whether an individual is at high risk for colorectal cancer, in accordance with the guidelines of the American Cancer Society for colorectal cancer screening.

The coverage requirement applies to both individual and group health insurance policies and plans, including defined network plans and cooperative sickness care associations; to health care plans offered by the state to its employees, including a self-insured plan; and to self-insured health plans of counties, cities, towns, villages, and school districts. The requirement specifically does not apply to limited-scope benefit plans or to policies covering only certain specified diseases other than cancer. The required coverage may be subject to any limitations, exclusions, or cost-sharing provisions that apply generally under the policy or plan.

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For further information see the *state and local* fiscal estimate, which will be printed as an appendix to this bill.

The people of the state of Wisconsin, represented in senate and assembly, do enact as follows:

1	SECTION 1. 40.51 (8) of the statutes is amended to read:
2	40.51 (8) Every health care coverage plan offered by the state under sub. (6)
3	shall comply with ss. 631.89, 631.90, 631.93 (2), 631.95, 632.72 (2), 632.746 (1) to (8)
4	and (10), 632.747, 632.748, 632.83, 632.835, 632.855, 632.853, 632.855, 632.87 (3) to
5	(5) (6), 632.895 (5m) and (8) to (15) (16), and 632.896.
6	SECTION 2. 40.51 (8m) of the statutes is amended to read:
7	40.51 (8m) Every health care coverage plan offered by the group insurance
8	board under sub. (7) shall comply with ss. 631.95, 632.746 (1) to (8) and (10), 632.747,
9	632.748,632.83,632.835,632.85,632.853,632.855, and $632.895(11)$ to $(15)(16)$.
10	Section 3. 66.0137 (4) of the statutes is amended to read:
11	66.0137 (4) Self-insured health plans. If a city, including a 1st class city, or
12	a village provides health care benefits under its home rule power, or if a town
13	provides health care benefits, to its officers and employees on a self-insured basis,
14	the self–insured plan shall comply with ss. $49.493(3)(d)$, 631.89 , 631.90 , $631.93(2)$,
15	632.746 (10) (a) 2. and (b) 2., 632.747 (3), 632.85, 632.853, 632.855, 632.87 (4), and
16	(5), and (6), 632.895 (9) to (15) (16), 632.896, and 767.25 (4m) (d) 767.513 (4).
17	SECTION 4. 111.91 (2) (n) of the statutes is amended to read:
18	111.91 (2) (n) The provision to employees of the health insurance coverage
19	required under s. 632.895 (11) to (14) and (16).

Section 5. 120.13 (2) (g) of the statutes is amended to read:

1	120.13 (2) (g) Every self-insured plan under par. (b) shall comply with ss
2	49.493 (3) (d), 631.89, 631.90, 631.93 (2), 632.746 (10) (a) 2. and (b) 2., 632.747 (3)
3	632.85, 632.853, 632.855, 632.87 (4) and, (5), and (6), 632.895 (9) to (15) (16), 632.896
4	and 767.25 (4m) (d) 767.513 (4) .
5	SECTION 6. 185.981 (4t) of the statutes is amended to read:
6	185.981 (4t) A sickness care plan operated by a cooperative association is
7	subject to ss. 252.14, 631.17, 631.89, 631.95, 632.72 (2), 632.745 to 632.749, 632.85
8	632.853, 632.855, 632.87 (2m), (3), (4), and (5), and (6), 632.895 (10) to (15) (16), and
9	632.897 (10) and chs. 149 and 155.
10	SECTION 7. 185.983 (1) (intro.) of the statutes is amended to read:
11	185.983 (1) (intro.) Every such voluntary nonprofit sickness care plan shall be
12	exempt from chs. 600 to 646, with the exception of ss. 601.04, 601.13, 601.31, 601.41
13	601.42, 601.43, 601.44, 601.45, 611.67, 619.04, 628.34 (10), 631.17, 631.89, 631.93
14	631.95, 632.72 (2), 632.745 to 632.749, 632.775, 632.79, 632.795, 632.85, 632.853
15	632.855, 632.87 (2m), (3), (4), and (5), and (6), 632.895 (5) and (9) to (15) (16), 632.896
16	and 632.897 (10) and chs. 609, 630, 635, 645, and 646, but the sponsoring association
17	shall:
18	SECTION 8. 609.87 of the statutes is created to read:
19	609.87 Coverage of colorectal cancer screening. Defined network plans
20	are subject to s. 632.895 (16).
21	SECTION 9. 632.895 (16) of the statutes is created to read:
22	632.895 (16) COLORECTAL CANCER SCREENING. (a) Except as provided in par. (c),
23	every disability insurance policy, and every self-insured health plan of the state or
24	a county, city, village, town, or school district, that provides coverage of any
25	diagnostic or surgical procedures shall provide coverage of colorectal cancer

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SECTION 9

- 1 examinations and laboratory tests, in accordance with guidelines specified by the 2 commissioner by rule under par. (d) 1. and 3., for all of the following: 3
 - 1. An insured or enrollee who is 50 years of age or older.
 - 2. An insured or enrollee who is under 50 years of age and at high risk for colorectal cancer, as specified by the commissioner by rule under par. (d) 2. and 3.
 - The coverage required under this subsection may be subject to any limitations, exclusions, or cost-sharing provisions that apply generally under the disability insurance policy or self-insured health plan.
 - (c) This subsection does not apply to any of the following:
 - 1. A disability insurance policy that covers only certain specified diseases other

SA1-2 W than cancer

- 2. A health care plan offered by a limited service health organization, as defined in s. 609.01 (3), or by a preferred provider plan, as defined in s. 609.01 (4), that is not a defined network plan, as defined in s. 609.01 (1b).
- 3. A disability insurance policy, or a self-insured health plan of the state or a county, city, town, village, or school district, that provides only limited-scope dental or vision benefits.
- (d) The commissioner, in consultation with the secretary of health services shall promulgate rules that do all of the following:
- 1. Specify guidelines for the colorectal cancer screening that must be covered under this subsection, in accordance with the guidelines of the American Cancer Society for colorectal cancer screening.
- 2. Specify the factors for determining whether an individual is at high risk for colorectal cancer, in accordance with the guidelines of the American Cancer Society

for colorectal cancer screening.

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1	Periodically 3. Splate the guidelines under subd. 1. and the factors under subd. 2., in	
2	accordance with updates to the guidelines of the American Cancer Society for	
3	colorectal cancer screening and as medically appropriate.	5
4	SECTION 10. Initial applicability	

Section 10. Initial applicability.

- (1) This act first applies to all of the following:
- (a) Except as provided in paragraphs (b) and (c), disability insurance policies that are issued or renewed, and governmental self-insured health plans that are established, extended, modified, or renewed, on the effective date of this paragraph.
- (b) Disability insurance policies covering employees who are affected by a collective bargaining agreement containing provisions inconsistent with this act that are issued or renewed on the earlier of the following:
 - 1. The day on which the collective bargaining agreement expires.
- 2. The day on which the collective bargaining agreement is extended, modified, or renewed.
- Governmental self-insured health plans covering employees who are affected by a collective bargaining agreement containing provisions inconsistent with this act that are established, extended, modified, or renewed on the earlier of the following:
 - 1. The day on which the collective bargaining agreement expires.
- 2. The day on which the collective bargaining agreement is extended, modified, or renewed.

SECTION 11. Effective date.

(1) This act takes effect on the first day of the 7th month beginning after publication.

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State of Misconsin 2009 - 2010 LEGISLATURE

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SENATE AMENDMENT 1, TO 2009 SENATE BILL 163

September 16, 2009 - Offered by Senator WIRCH.

- 1 At the locations indicated, amend the bill as follows:
- 2 **1.** Page 4, line 10: delete "other".
- 4 (END)



State of Misconsin 2009 - 2010 LEGISLATURE

LRBa1689/2 PJK:jld:rs

ASSEMBLY AMENDMENT 1, TO 2009 SENATE BILL 163

March 10, 2010 - Offered by Representative Molepske Jr..

1	At the locations indicated, amend the bill as follows:
2	1. Page 4, line 18: after "services" insert "and after considering nationally
3	validated guidelines, including guidelines issued by the American Cancer Society for
4	colorectal cancer screening".
5	Page 4, line 21: delete the material beginning with ", in accordance" and
6	ending with "screening" on line 22.
7	3. Page 4, line 24: delete the material beginning with ", in accordance" and
8	ending with "screening" on line 25.
9	$\sqrt{\ /\ /}$ Page 5, line 1: delete "Update" and substitute "Periodically update".
10	5. Page 5, line 1: delete the material beginning with "in" and ending with
11	"screening and" on line 3.
12	(END)